
PROCUREMENT NOTICE

State of Connecticut – Department of Public Health
Public Health Initiatives Branch
Infectious Diseases Section
Healthcare Associated Infections Program

RFP#2014-0909

REQUEST FOR PROPOSAL

Get Smart Antimicrobial Use in a primary care physician organization, primary care network, outpatient medical care group practice, or community health center in Connecticut

The State of Connecticut, Department of Public Health, is seeking proposals from applicants to provide education on the proper and judicious use of antibiotics to Connecticut residents in their primary care physician organization, primary care network, outpatient medical care group practice, or community health center.

The Request for Proposals is available in electronic format on the State Contracting Portal at http://www.biznet.ct.gov/SCP_Search/Default.aspx?Acclast=2

Department's Official Contact:

Name: Alessandra Litro
Address: 410 Capitol Avenue, PO Box 340308, MS # 11 FDS,
Hartford, CT 06134-0308
Phone: 860-509-7995
Fax: 860-509-7910
E-Mail: Alessandra.litro@ct.gov

The RFP is also available on the Department's website at <http://www.ct.gov/dph/site/default.asp>
Through the "Requests for Proposals" link

A printed copy of the RFP can be obtained from the Official Contact upon request. Deadline for submission of proposals is November 22, 2013, 4:30 PM EDT.

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I. GENERAL INFORMATION

■ A. INTRODUCTION

1. RFP Name or Number. Get Smart Antimicrobial Use in a primary care physician organization, primary care network, outpatient medical care group practice, or community health center in Connecticut, DPH Log #2014-0909

2. Summary.

The Department is seeking proposals from primary care physician organizations, primary care networks, outpatient medical care group practices, and community health centers in Connecticut to assess outpatient prescribing practices, to develop a plan with measurable objectives to improve the practices, to implement a *Get Smart for Healthcare* campaign for the providers in the group, and to evaluate the campaign. The evaluation will include both process measures such as participating rates in the campaign and the outcomes, which will be an improvement in knowledge skills and attitudes about judicious use of antibiotics in the practices as well as data on actual antimicrobial prescribing practices. The campaign will also promote use by the providers of the *Get Smart: Know When Antibiotics Work* campaign for patients. Activities of the contractor will include a baseline assessment of knowledge, attitudes, and behaviors of providers and patients, and in-state travel for circuit riding “detailing” visits to provider to deliver educational sessions and to distribute educational materials. Supplies and materials funding will be primarily used for reproduction of Get Smart (Get Smart for Healthcare and Get Smart Know When Antibiotics Work) materials for distribution during educational sessions. The contractors’ evaluation of the effectiveness of the project will include, to the extent feasible, documentation of prescribing practices by a sample of all providers in the group with prescribing authority will be documented.

3. Synopsis (Optional).

See “Summary” above.

4. Commodity Codes. The services that the Department wishes to procure through this RFP are as follows:

- 0600: Services (Professional, Support, Consulting and Misc. Services)
- 1000: Healthcare Services
- 2000: Community and Social Services
- 3000: Education and Training

■ B. ABBREVIATIONS / ACRONYMS / DEFINITIONS

BFO	Best and Final Offer
C.G.S.	Connecticut General Statutes
CDC	US Department of Health and Human Services, Centers for Disease Control and Prevention
CHRO	Commission on Human Rights and Opportunities (CT)
CT	Connecticut
DAS	Department of Administrative Services (CT)
DHHS	US Department of Health and Human Services
DPH	Department of Public Health (CT)

FOIA	Freedom of Information Act (CT)
IRS	Internal Revenue Service (US)
LGBT	Lesbian, Gay, Bisexual and Transgender
LOI	Letter of Intent
OAG	Office of the Attorney General (CT)
OPM	Office of Policy and Management (CT)
OSC	Office of the State Comptroller (CT)
POS	Purchase of Service
P.A.	Public Act (CT)
RFP	Request for Proposal
SEEC	State Elections Enforcement Commission (CT)
U.S.	United States

- *Contractor:* a private provider organization, CT State agency, or municipality that enters into a POS contract with the Department as a result of this RFP
- *Proposer:* a private provider organization, CT State agency, or municipality that has submitted a proposal to the Department in response to this RFP
- *Prospective proposer:* a private provider organization, CT State agency, or municipality that may submit a proposal to the Department in response to this RFP, but has not yet done so
- *Subcontractor:* an individual (other than an employee of the contractor) or business entity hired by a contractor to provide a specific health or human service as part of a POS contract with the Department as a result of this RFP

■ C. INSTRUCTIONS

1. **Official Contact.** The Department has designated the individual below as the Official Contact for purposes of this RFP. The Official Contact is the **only authorized contact** for this procurement and, as such, handles all related communications on behalf of the Department. Proposers, prospective proposers, and other interested parties are advised that any communication with any other Department employee(s) (including appointed officials) or personnel under contract to the Department about this RFP is strictly prohibited. Proposers or prospective proposers who violate this instruction may risk disqualification from further consideration.

Name: Alessandra Litro
 Address: 410 Capitol Avenue, MS# 11FDS, P O Box 340308, Hartford, CT
 06134-0308
 Phone: 860-509-7995
 Fax: 860-509-7910
 E-Mail: alesandra.litro@ct.gov

Please ensure that e-mail screening software (if used) recognizes and accepts e-mails from the Official Contact.

2. **RFP Information.** The RFP, amendments to the RFP, and other information associated with this procurement are available in electronic format from the Official Contact or from the Internet at the following locations:

- Department's RFP Web Page
[http:// http://das.ct.gov/cr1.aspx?page=12](http://das.ct.gov/cr1.aspx?page=12)

- State Contracting Portal
[http:// www.das.state.ct.us/Purchase/Portal/Portal_Home.asp](http://www.das.state.ct.us/Purchase/Portal/Portal_Home.asp)

It is strongly recommended that any proposer or prospective proposer interested in this procurement subscribe to receive e-mail alerts from the State Contracting Portal. Subscribers will receive a daily e-mail announcing procurements and addendums that are posted on the portal. This service is provided as a courtesy to assist in monitoring activities associated with State procurements, including this RFP.

Printed copies of all documents are also available from the Official Contact upon request.

3. Contract Awards. The award of any contract pursuant to this RFP is dependent upon the availability of funding to the Department. The Department anticipates the following:

- Total Funding Available: \$50,000
- Number of Awards: 1-2
- Contract Cost: To be negotiated with successful proposers.
Grant award amounts will depend on the number of participants to be served as well as the complexity of the proposed project(s).
- Contract Term: Anticipated Contract term will begin December 1, 2014, and run for a period of eight months.

This funding is made available to the Department of Public Health from the Centers for Disease Control and Prevention PPHF Building Epidemiology and Laboratory Capacity (ELC) Grant

4. Eligibility. Private provider organizations (defined as non-state entities that are either nonprofit or proprietary corporations or partnerships). Individuals who are not a duly formed business entity are ineligible to participate in this procurement.

5. Minimum Qualifications of Proposers. To qualify for a contract award, a proposer must have the following minimum qualifications:

The Department of Public Health (DPH) is seeking organizations that can demonstrate the ability to provide cost-effective training of ambulatory care providers with prescribing authority and education of their patients on the appropriate indications and use of antimicrobials (antibiotics especially) with the intent of reducing adverse events due to inappropriate use, such as the development of antimicrobial resistance among pathogenic microorganisms. To qualify, the proposers should have the following:

- Positive participant impact through the location and accessibility of program space and hours as well as culturally and linguistically appropriate services offered;
- Appropriate range and quality of related services;
- Efficient use of program staff and space for the provision of program services;
- Cost of operations within the limit of available funds;
- Positive history of compliance with the Department for entities who have worked with the Department in the past.
- Financial integrity/solvency.

Applications will be accepted from groups of providers providing outpatient (ambulatory) medical services, including community health centers. These provider groups can be associated with a hospital or hospital system or not.

6. Procurement Schedule. See below. Dates after the due date for proposals ("Proposals Due") are target dates only (*). The Department may amend the schedule, as needed. Any change will be made by means of an amendment to this RFP and will be posted on the State Contracting Portal and, if available, the Department's RFP Web Page.

- RFP Released: October 18, 2013
- Deadline for Questions: October 31, 2013
- Answers Released: November 8, 2013
- Proposals Due: November 22, 2013
- (*) Proposer Selection: December 6, 2013
- (*) Start of Contract Negotiations: December 9, 2013
- (*) Start of Contract: January 1, 2014

7. Letter of Intent. A Letter of Intent (LOI) **is not** required by this RFP.

8. Inquiry Procedures. All questions regarding this RFP or the Department's procurement process must be directed, in writing, to the Official Contact before the deadline specified in the Procurement Schedule. The early submission of questions is encouraged. Questions will not be accepted or answered verbally – neither in person nor over the telephone. All questions received before the deadline(s) will be answered. However, the Department will not answer questions when the source is unknown (i.e., nuisance or anonymous questions). Questions deemed unrelated to the RFP or the procurement process will not be answered. At its discretion, the Department may or may not respond to questions received after the deadline. If this RFP requires a Letter of Intent, the Department reserves the right to answer questions only from those who have submitted such a letter. The Department may combine similar questions and give only one answer. All questions and answers will be compiled into a written amendment to this RFP. If any answer to any question constitutes a material change to the RFP, the question and answer will be placed at the beginning of the amendment and duly noted as such. The agency will release the answers to questions on the date(s) established in the Procurement Schedule. The Department will publish any and all amendments to this RFP on the State Contracting Portal and, if available, on the Department's RFP Web Page. At its discretion, the Department may distribute any amendments to this RFP to prospective proposers who submitted a Letter of Intent or attended the RFP Conference.

9. RFP Conference. An RFP conference **will not** be held to answer questions from prospective proposers; however, the Department will accept questions in writing regarding the RFP. All questions submitted will be answered in a written amendment to this RFP, which will serve as the Department's official response to questions. If any answer to any question constitutes a material change to the RFP, the question and answer will be placed at the beginning of the amendment and duly noted as such. The agency will release the amendment on the date established in the Procurement Schedule. The Department will publish any and all amendments to this RFP on the State Contracting Portal and, if available, on the Department's RFP Web Page.

10. Proposal Due Date and Time. Proposals must be received by the Official Contact on or before the due date and time:

- **Due Date: November 22, 2013**
- **Time: 4:30 P.M. Eastern Daylight Savings Time**

Faxed or e-mailed proposals will not be evaluated. When hand-delivering proposals by courier or in person, allow extra time due to building security procedures. The Department will not accept a postmark date as the basis for meeting the submission due

date and time. Proposals received after the due date and time may be accepted by the Department as a clerical function, but late proposals will not be evaluated. At the discretion of the Department, late proposals may be destroyed or retained for pick up by the submitters.

An acceptable submission must include the following:

- One (1) original proposal;
- Six (6) conforming copies of the original proposal; and
- One (1) conforming electronic copy of the original proposal.

The original proposal must carry original signatures and be clearly marked on the cover as "Original." Unsigned proposals will not be evaluated. The original proposal and each conforming copy of the proposal must be complete, properly formatted and outlined, and ready for evaluation by the Screening Committee. The electronic copy of the proposal must be compatible with *Microsoft Office Word 2010*. For the electronic copy, the entire copy may be scanned and submitted in Portable Document Format (PDF) or similar file format to the email address alesandra.litro@ct.gov.

11. Multiple Proposals. The submission of multiple proposals is not an option with this procurement.

12. Declaration of Confidential Information. Proposers must include a declaration statement concerning confidentiality. Proposers are advised that all materials associated with this procurement are subject to the terms of the Freedom of Information Act (FOIA), the Privacy Act, and all rules, regulations and interpretations resulting from them. If a proposer deems that certain information required by this RFP is confidential, the proposer must label such information as CONFIDENTIAL. In Section C of the proposal submission, the proposer must reference where the information labeled CONFIDENTIAL is located in the proposal. *EXAMPLE: Section G.1.a.* For each subsection so referenced, the proposer must provide a convincing explanation and rationale sufficient to justify an exemption of the information from release under the FOIA. The explanation and rationale must be stated in terms of (a) the prospective harm to the competitive position of the proposer that would result if the identified information were to be released and (b) the reasons why the information is legally exempt from release pursuant to C.G.S. § 1-210(b).

13. Conflict of Interest - Disclosure Statement. Proposers must include a disclosure statement concerning any current business relationships (within the last three (3) years) that pose a conflict of interest, as defined by C.G.S. § 1-85. A conflict of interest exists when a relationship exists between the proposer and a public official (including an elected official) or State employee that may interfere with fair competition or may be adverse to the interests of the State. The existence of a conflict of interest is not, in and of itself, evidence of wrongdoing. A conflict of interest may, however, become a legal matter if a proposer tries to influence, or succeeds in influencing, the outcome of an official decision for their personal or corporate benefit. The Department will determine whether any disclosed conflict of interest poses a substantial advantage to the proposer over the competition, decreases the overall competitiveness of this procurement, or is not in the best interests of the State. In the absence of any conflict of interest, a proposer must affirm such in the disclosure statement. *Example: "[name of proposer] has no current business relationship (within the last three (3) years) that poses a conflict of interest, as defined by C.G.S. § 1-85."*

■ D. PROPOSAL FORMAT

- 1. Required Outline.** All proposals must follow the required outline presented in Section IV – Proposal Outline. Proposals that fail to follow the required outline will be deemed non-responsive and not evaluated.
- 2. Cover Sheet.** The Cover Sheet is Page 1 of the proposal. Proposers must complete and use the Cover Sheet form provided by the Department in Section IV.I – Forms.
- 3. Table of Contents.** All proposals must include a Table of Contents that conforms with the required proposal outline. (See Section IV.)
- 4. Executive Summary.** Proposals must include a high-level summary, not exceeding two pages, of the main proposal and cost proposal.
- 5. Attachments.** Attachments other than the required Appendices or Forms identified in Section IV are not permitted and will not be evaluated. Further, the required Appendices or Forms must not be altered or used to extend, enhance, or replace any component required by this RFP. Failure to abide by these instructions will result in disqualification.
- 6. Style Requirements.** Submitted proposals must conform to the following specifications:
 - Binding Type: Use a single binding clip; do not use staples or other more permanent binding.
 - Dividers: The budget should be clipped as an appendix so it can be evaluated separately from the proposal.
 - Paper Size: 8.5 x 11
 - Page Limit: 12 pages [includes proposal narrative and work plan]
 - Print Style: 2-sided
 - Font Size: 12
 - Font Type: Times New Roman
 - Margins: 1 inch
 - Line Spacing: 1 ½ minimum spacing
- 7. Pagination.** The proposer’s name must be displayed in the header of each page. All pages, including the required Appendices and Forms, must be numbered in the footer.
- 8. Packaging and Labeling Requirements.** All proposals must be submitted in sealed envelopes or packages and be addressed to the Official Contact. The Legal Name and Address of the proposer must appear in the upper left corner of the envelope or package. The RFP Name or Number must be clearly displayed on the envelope or package. Any received proposal that does not conform to these packaging or labeling instructions will be opened as general mail. Such a proposal may be accepted by the Department as a clerical function, but it will not be evaluated. At the discretion of the Department, such a proposal may be destroyed or retained for pick up by the submitters.

■ E. EVALUATION OF PROPOSALS

- 1. Evaluation Process.** It is the intent of the Department to conduct a comprehensive, fair, and impartial evaluation of proposals received in response to this RFP. When evaluating proposals, negotiating with successful proposers, and awarding contracts, the Department will conform with its written procedures for POS procurements (pursuant to C.G.S. § 4-217) and the State’s Code of Ethics (pursuant to C.G.S. §§ 1-84 and 1-85).
- 2. Screening Committee.** The Department will designate a Screening Committee to evaluate proposals submitted in response to this RFP. The contents of all submitted

proposals, including any confidential information, will be shared with the Screening Committee. Only proposals found to be responsive (that is, complying with all instructions and requirements described herein) will be reviewed, rated, and scored. Proposals that fail to comply with all instructions will be rejected without further consideration. Attempts by any proposer (or representative of any proposer) to contact or influence any member of the Screening Committee may result in disqualification of the proposer.

3. Minimum Submission Requirements. All proposals must comply with the requirements specified in this RFP. To be eligible for evaluation, proposals must (1) be received on or before the due date and time; (2) meet the Proposal Format requirements; (3) follow the required Proposal Outline; and (4) be complete. Proposals that fail to follow instructions or satisfy these minimum submission requirements will not be reviewed further. The Department will reject any proposal that deviates significantly from the requirements of this RFP.

4. Evaluation Criteria (and Weights). Proposals meeting the Minimum Submission Requirements will be evaluated according to the established criteria. The criteria are the objective standards that the Screening Committee will use to evaluate the technical merits of the proposals. The criteria are weighted according to their relative importance:

- Organizational Profile and Service Area (10%)
- Staffing Plan and Subcontractors (15%) *see note*
- Work Plan (30%)
- Budget and Budget Narrative (20%)

For more detail on these criteria, see the Technical Review Criteria worksheet in the appendices.

Note: Past history of program success, effectiveness and compliance with Department requirements if applicable (for agencies that have previously been contracted with the Department). As part of its evaluation of the Staffing Plan, the Screening Committee will consider the proposer's demonstrated commitment to affirmative action, as required by the Regulations of CT State Agencies § 46A-68j-30(10).

5. Proposer Selection. Upon completing its evaluation of proposals, the Screening Committee will submit the rankings of all proposals to the Department head. The final selection of a successful proposer is at the discretion of the Department head. Any proposer selected will be so notified and awarded an opportunity to negotiate a contract with the Department. Such negotiations may, but will not automatically, result in a contract. Pursuant to Governor M. Jodi Rell's Executive Order No. 3, any resulting contract will be posted on the State Contracting Portal. All unsuccessful proposers will be notified by e-mail or U.S. mail, at the Department's discretion, about the outcome of the evaluation and proposer selection process.

6. Debriefing. Within ten (10) days of receiving notification from the Department, unsuccessful proposers may contact the Official Contact and request information about the evaluation and proposer selection process. The e-mail sent date or the postmark date on the notification envelope will be considered "day one" of the ten (10) days. If unsuccessful proposers still have questions after receiving this information, they may contact the Official Contact and request a meeting with the Department to discuss the evaluation process and their proposals. If held, the debriefing meeting will not include any comparisons of unsuccessful proposals with other proposals. The Department will schedule and hold the debriefing meeting within fifteen (15) days of the request. The

Department will not change, alter, or modify the outcome of the evaluation or selection process as a result of any debriefing meeting.

- 7. Appeal Process.** Proposers may appeal any aspect the Department's competitive procurement, including the evaluation and proposer selection process. Any such appeal must be submitted to the Department head. A proposer may file an appeal at any time after the proposal due date, but not later than thirty (30) days after an agency notifies unsuccessful proposers about the outcome of the evaluation and proposer selection process. The e-mail sent date or the postmark date on the notification envelope will be considered "day one" of the thirty (30) days. The filing of an appeal shall not be deemed sufficient reason for the Department to delay, suspend, cancel, or terminate the procurement process or execution of a contract. More detailed information about filing an appeal may be obtained from the Official Contact.
- 8. Contract Execution.** Any contract developed and executed as a result of this RFP is subject to the Department's contracting procedures, which may include approval by the Office of the Attorney General.

II. MANDATORY PROVISIONS

■ A. POS STANDARD CONTRACT, PARTS I AND II

By submitting a proposal in response to this RFP, the proposer implicitly agrees to comply with the provisions of Parts I and II of the State's "standard contract" for POS:

Part I of the standard contract is maintained by the Department and will include the scope of services, contract performance, quality assurance, reports, terms of payments, budget, and other program-specific provisions of any resulting POS contract. A sample of Part I is included in Section Five - Appendices with this RFP.

Part II of the standard contract is maintained by OPM and includes the mandatory terms and conditions of the POS contract. Part II is available on OPM's website at:

http://www.ct.gov/opm/fin/standard_contract

Part II is incorporated into the model contract included with this RFP.

Note:

Included in Part II of the standard contract is the State Elections Enforcement Commission's notice (pursuant to C.G.S. § 9-612(g)(2)) advising executive branch State contractors and prospective State contractors of the ban on campaign contributions and solicitations. If a proposer is awarded an opportunity to negotiate a contract with the Department and the resulting contract has an anticipated value in a calendar year of \$50,000 or more, or a combination or series of such agreements or contracts has an anticipated value of \$100,000 or more, the proposer must inform the proposer's principals of the contents of the SEEC notice.

Part I of the standard contract may be amended by means of a written instrument signed by the Department, the selected proposer (contractor), and, if required, the Attorney General's Office. Part II of the standard contract may be amended only in consultation with, and with the approval of, the Office of Policy and Management and the Attorney General's Office.

■ B. ASSURANCES

By submitting a proposal in response to this RFP, a proposer implicitly gives the following assurances:

- 1. Collusion.** The proposer represents and warrants that the proposer did not participate in any part of the RFP development process and had no knowledge of the specific contents of the RFP prior to its issuance. The proposer further represents and warrants that no agent, representative, or employee of the State participated directly in the preparation of the proposer's proposal. The proposer also represents and warrants that the submitted proposal is in all respects fair and is made without collusion or fraud.
- 2. State Officials and Employees.** The proposer certifies that no elected or appointed official or employee of the State has or will benefit financially or materially from any contract resulting from this RFP. The Department may terminate a resulting contract if it is determined that gratuities of any kind were either offered or received by any of the aforementioned officials or employees from the proposer, contractor, or its agents or employees.
- 3. Competitors.** The proposer assures that the submitted proposal is not made in connection with any competing organization or competitor submitting a separate proposal

in response to this RFP. No attempt has been made, or will be made, by the proposer to induce any other organization or competitor to submit, or not submit, a proposal for the purpose of restricting competition. The proposer further assures that the proposed costs have been arrived at independently, without consultation, communication, or agreement with any other organization or competitor for the purpose of restricting competition. Nor has the proposer knowingly disclosed the proposed costs on a prior basis, either directly or indirectly, to any other organization or competitor.

4. **Validity of Proposal.** The proposer certifies that the proposal represents a valid and binding offer to provide services in accordance with the terms and provisions described in this RFP and any amendments or attachments hereto. The proposal shall remain valid for a period of 180 days after the submission due date and may be extended beyond that time by mutual agreement. At its sole discretion, the Department may include the proposal, by reference or otherwise, into any contract with the successful proposer.
5. **Press Releases.** The proposer agrees to obtain prior written consent and approval of the Department for press releases that relate in any manner to this RFP or any resultant contract.

■ C. TERMS AND CONDITIONS

By submitting a proposal in response to this RFP, a proposer implicitly agrees to comply with the following terms and conditions:

1. **Equal Opportunity and Affirmative Action.** The State is an Equal Opportunity and Affirmative Action employer and does not discriminate in its hiring, employment, or business practices. The State is committed to complying with the Americans with Disabilities Act of 1990 (ADA) and does not discriminate on the basis of disability in admission to, access to, or operation of its programs, services, or activities.
2. **Preparation Expenses.** Neither the State nor the Department shall assume any liability for expenses incurred by a proposer in preparing, submitting, or clarifying any proposal submitted in response to this RFP.
3. **Exclusion of Taxes.** The Department is exempt from the payment of excise and sales taxes imposed by the federal government and the State. Proposers are liable for any other applicable taxes.
4. **Proposed Costs.** No cost submissions that are contingent upon a State action will be accepted. All proposed costs must be fixed through the entire term of the contract.
5. **Changes to Proposal.** No additions or changes to the original proposal will be allowed after submission. While changes are not permitted, the Department may request and authorize proposers to submit written clarification of their proposals, in a manner or format prescribed by the Department, and at the proposer's expense.
6. **Supplemental Information.** Supplemental information will not be considered after the deadline submission of proposals, unless specifically requested by the Department. The Department may ask a proposer to give demonstrations, interviews, oral presentations or further explanations to clarify information contained in a proposal. Any such demonstration, interview, or oral presentation will be at a time selected and in a place provided by the Department. At its sole discretion, the Department may limit the number of proposers invited to make such a demonstration, interview, or oral presentation and may limit the number of attendees per proposer.

- 7. Presentation of Supporting Evidence.** If requested by the Department, a proposer must be prepared to present evidence of experience, ability, data reporting capabilities, financial standing, or other information necessary to satisfactorily meet the requirements set forth or implied in this RFP. The Department may make onsite visits to an operational facility or facilities of a proposer to evaluate further the proposer's capability to perform the duties required by this RFP. At its discretion, the Department may also check or contact any reference provided by the proposer.
- 8. RFP Is Not An Offer.** Neither this RFP nor any subsequent discussions shall give rise to any commitment on the part of the State or the Department or confer any rights on any proposer unless and until a contract is fully executed by the necessary parties. The contract document will represent the entire agreement between the proposer and the Department and will supersede all prior negotiations, representations or agreements, alleged or made, between the parties. The State shall assume no liability for costs incurred by the proposer or for payment of services under the terms of the contract until the successful proposer is notified that the contract has been accepted and approved by the Department and, if required, by the Attorney General's Office.

■ D. RIGHTS RESERVED TO THE STATE

By submitting a proposal in response to this RFP, a proposer implicitly accepts that the following rights are reserved to the State:

- 1. Timing Sequence.** The timing and sequence of events associated with this RFP shall ultimately be determined by the Department.
- 2. Amending or Canceling RFP.** The Department reserves the right to amend or cancel this RFP on any date and at any time, if the Department deems it to be necessary, appropriate, or otherwise in the best interests of the State.
- 3. No Acceptable Proposals.** In the event that no acceptable proposals are submitted in response to this RFP, the Department may reopen the procurement process, if it is determined to be in the best interests of the State.
- 4. Award and Rejection of Proposals.** The Department reserves the right to award in part, to reject any and all proposals in whole or in part, for misrepresentation or if the proposal limits or modifies any of the terms, conditions, or specifications of this RFP. The Department may waive minor technical defects, irregularities, or omissions, if in its judgment the best interests of the State will be served. The Department reserves the right to reject the proposal of any proposer who submits a proposal after the submission date and time.
- 5. Sole Property of the State.** All proposals submitted in response to this RFP are to be the sole property of the State. Any product, whether acceptable or unacceptable, developed under a contract awarded as a result of this RFP shall be the sole property of the State, unless stated otherwise in this RFP or subsequent contract. The right to publish, distribute, or disseminate any and all information or reports, or part thereof, shall accrue to the State without recourse.
- 6. Contract Negotiation.** The Department reserves the right to negotiate or contract for all or any portion of the services contained in this RFP. The Department further reserves the right to contract with one or more proposer for such services. After reviewing the scored criteria, the Department may seek Best and Final Offers (BFO) on cost from proposers. The Department may set parameters on any BFOs received.

7. **Clerical Errors in Award.** The Department reserves the right to correct inaccurate awards resulting from its clerical errors. This may include, in extreme circumstances, revoking the awarding of a contract already made to a proposer and subsequently awarding the contract to another proposer. Such action on the part of the State shall not constitute a breach of contract on the part of the State since the contract with the initial proposer is deemed to be void *ab initio* and of no effect as if no contract ever existed between the State and the proposer.
8. **Key Personnel.** When the Department is the sole funder of a purchased service, the Department reserves the right to approve any additions, deletions, or changes in key personnel, with the exception of key personnel who have terminated employment. The Department also reserves the right to approve replacements for key personnel who have terminated employment. The Department further reserves the right to require the removal and replacement of any of the proposer's key personnel who do not perform adequately, regardless of whether they were previously approved by the Department.

■ E. STATUTORY AND REGULATORY COMPLIANCE

By submitting a proposal in response to this RFP, the proposer implicitly agrees to comply with all applicable State and federal laws and regulations, including, but not limited to, the following:

1. **Freedom of Information, C.G.S. § 1-210(b).** The Freedom of Information Act (FOIA) generally requires the disclosure of documents in the possession of the State upon request of any citizen, unless the content of the document falls within certain categories of exemption, as defined by C.G.S. § 1-210(b). Proposers are generally advised not to include in their proposals any confidential information. If the proposer indicates that certain documentation, as required by this RFP, is submitted in confidence, the State will endeavor to keep said information confidential to the extent permitted by law. The State has no obligation to initiate, prosecute, or defend any legal proceeding or to seek a protective order or other similar relief to prevent disclosure of any information pursuant to a FOIA request. The proposer has the burden of establishing the availability of any FOIA exemption in any proceeding where it is an issue. While a proposer may claim an exemption to the State's FOIA, the final administrative authority to release or exempt any or all material so identified rests with the State. In no event shall the State or any of its employees have any liability for disclosure of documents or information in the possession of the State and which the State or its employees believe(s) to be required pursuant to the FOIA or other requirements of law.
2. **Contract Compliance, C.G.S. § 4a-60 and Regulations of CT State Agencies § 46a-68j-21 thru 43, inclusive.** CT statute and regulations impose certain obligations on State agencies (as well as contractors and subcontractors doing business with the State) to insure that State agencies do not enter into contracts with organizations or businesses that discriminate against protected class persons.
3. **Consulting Agreements, C.G.S. § 4a-81.** Proposals for State contracts with a value of \$50,000 or more in a calendar or fiscal year, excluding leases and licensing agreements of any value, shall include a consulting agreement affidavit attesting to whether any consulting agreement has been entered into in connection with the proposal. As used herein "consulting agreement" means any written or oral agreement to retain the services, for a fee, of a consultant for the purposes of (A) providing counsel to a contractor, vendor, consultant or other entity seeking to conduct, or conducting, business with the State, (B) contacting, whether in writing or orally, any executive, judicial, or administrative office of

the State, including any department, institution, bureau, board, commission, authority, official or employee for the purpose of solicitation, dispute resolution, introduction, requests for information or (C) any other similar activity related to such contract. Consulting agreement does not include any agreements entered into with a consultant who is registered under the provisions of C.G.S. Chapter 10 as of the date such affidavit is submitted in accordance with the provisions of C.G.S. § 4a-81. The Consulting Agreement Affidavit (OPM Ethics Form 5) is available on OPM's website at

http://www.ct.gov/opm/fin/ethics_forms

IMPORTANT NOTE: A proposer must complete and submit OPM Ethics Form 5 to the Department with the proposal.

4. Gift and Campaign Contributions, C.G.S. §§ 4-250 and 4-252(c); Governor M. Jodi Rell's Executive Orders No. 1, Para. 8 and No. 7C, Para. 10; C.G.S. § 9-612(g)(2).

If a proposer is awarded an opportunity to negotiate a contract with an anticipated value of \$50,000 or more in a calendar or fiscal year, the proposer must fully disclose any gifts or lawful contributions made to campaigns of candidates for statewide public office or the General Assembly. Municipalities and CT State agencies are exempt from this requirement. The gift and campaign contributions certification (OPM Ethics Form 1) is available on OPM's website at http://www.ct.gov/opm/fin/ethics_forms

IMPORTANT NOTE: The successful proposer must complete and submit OPM Ethics Form 1 to the Department prior to contract execution.

5. Nondiscrimination Certification, C.G.S. §§ 4a-60(a)(1) and 4a-60a(a)(1). If a proposer is awarded an opportunity to negotiate a contract, the proposer must provide the Department with *written representation* or *documentation* that certifies the proposer complies with the State's nondiscrimination agreements and warranties. A nondiscrimination certification is required for all State contracts – regardless of type, term, cost, or value. Municipalities and CT State agencies are exempt from this requirement. The nondiscrimination certification forms are available on OPM's website at http://www.ct.gov/opm/fin/nondiscrim_forms

IMPORTANT NOTE: The successful proposer must complete and submit the appropriate nondiscrimination certification form to the awarding Department prior to contract execution.

III. PROGRAM INFORMATION

■ A. DEPARTMENT OVERVIEW

The Connecticut Department of Public Health (DPH) is the state's leader in public health policy and advocacy. The agency is the center of a comprehensive network of public health services, and is a partner to local health departments for which it provides advocacy, training and certification, technical assistance and consultation, and specialty services such as risk assessment that are not available at the local level. The agency is a source of accurate, up-to-date health information to the Governor, the Legislature, the federal government and local communities. This information is used to monitor the health status of Connecticut's residents, set health priorities and evaluate the effectiveness of health initiatives. The agency is a regulator focused on health outcomes, maintaining a balance between assuring quality and administrative burden on the personnel, facilities and programs regulated. The agency is a leader on the national scene through direct input to federal agencies and the United States Congress.

This RFP is being issued by the Healthcare Associated Infections Program of the Infectious Diseases Section of the Public Health Initiatives Branch.

The ID Section, of which the HAI program is a component, is responsible for tracking the occurrence and facilitating the prevention of communicable diseases in Connecticut. The Section gathers reports of reportable infectious disease cases from laboratories and healthcare providers and analyzes the data to determine the burden of disease in the population and to identify outbreaks. The Section responds to these findings through additional investigations, communication with the public and the providers, and by implementing prevention programs.

■ B. PROGRAM OVERVIEW

Healthcare Associated Infections Program.

Healthcare associated infections are a major public health problem. The CDC estimates that 1 in 5 hospitalized patients contract an HAI while undergoing care, and that 99,000 die annually. The goal of the HAI Program is to eliminate the preventable fraction of HAIs across the entire healthcare spectrum in Connecticut. Authorizing legislation in 2006 established the program, funded staff, established a state Advisory Committee, and required annual public HAI reports. The HAI program attempts to address the desire of providers and the public for accurate actionable information on HAIs by focusing on high quality HAI surveillance, disseminating best practices for prevention, and encouraging trust and transparency. The HAI program is distinct from healthcare facility inspections and regulation.

The Program works in the following major activity areas:

Planning/partnering – The program is responsible for the development and updating of the state HAI surveillance and prevention plan. It works with the state Advisory Committee and other stakeholders on the development of these plans. It included an assessment of the current status of HAI surveillance and prevention what should be made publicly reportable, what HAIs should be priority for prevention activities the various healthcare services, and what resources are needed for HAI surveillance and prevention settings.

Surveillance - The state HAI Advisory Committee makes mandated public reporting recommendations to DPH. Several types of HAI are currently on the DPH Reportable Condition list. Two are associated with medical devices (Central Line Blood Stream Infections (CLABSIs) and Catheter Associated Urinary Tract Infections (CAUTI) in both acute and long term acute care hospitals. Two types of Surgical Site Infections (SSIs) in hospitals are also reportable: infection associated with colon surgery and with abdominal hysterectomies. Influenza vaccination rates among acute care hospital staff are also reportable. HAI reports are publicized on the DPH website, listing each hospital by name. Connecticut validates the accuracy of the data through periodic chart reviews. Surveillance and public reporting greatly expanded in 2012 in parallel with federal (Centers for Medicaid and Medicare Services) incentives. It is anticipated that this expansion will continue in future years to include additional types of HAI and settings other than acute care hospitals.

Enhanced surveillance activities – The Connecticut HAI program participates in the national Emerging Infections Program network lead by CDC. Current enhanced surveillance projects include a national HAI point prevalence and antimicrobial use survey in hospitals, a study on how to reduce the CLABSI surveillance data collection burden, and the development of a national HAI point prevalence and antimicrobial use survey in long term care facilities (nursing homes).

Prevention – HAI surveillance to gather actionable data is a first step to improve patient safety. The data are used to inform and direct prevention activities that include prevention and quality initiatives at individual facilities, or convening groups of healthcare facilities to participate in collaboratives with other facilities to share and follow best practices, and implementing facility-based initiatives to improve hand hygiene, disinfection procedures for medical equipment, and other preventive measures.

All hospitals and long term care facilities licensed by the DPH have a facility-wide program for the prevention, control, and investigation of infectious diseases. Nurses, physicians, medical technologists, and other professionals who have acquired special training in infection control or epidemiology manage these programs. Through their infection prevention and control programs, healthcare facilities strive to improve the care and safety of patients by following the recommendations and standards of agencies such as the DPH and the CDC.

The efforts of these infection prevention and control programs have resulted in the development of several national HAI prevention programs that offer participants opportunities for shared learning, support, and tools to help eliminate HAIs. The best known of these is the Comprehensive Unit-based Safety Program (CUSP) developed by staff of the Johns Hopkins Center for Patient Safety under the leadership of Dr. Peter Pronovost (a Connecticut native). This uses carefully crafted quality improvement and workplace culture change methods to achieve the goal of consistently and sustainably incorporating proven best practices to prevent CLABSIs (including the famous “checklist”). CUSP has been used to reduce CLABSIs at Hopkins and in a consortium of most of the hospitals in the state of Michigan. The Michigan “Keystone Center” project has sustained a 70 percent reduction in CLABSI over several years in a wide variety of hospitals, and has been successfully used in Connecticut.

The Connecticut Hospital Association has lead several prevention collaboratives based on CUSP over the past three years. CHA has led both CLABSI and CAUTI prevention collaboratives, and has recently embarked on SSI prevention collaborative. This year, they are working with hospitals on an ambitious statewide initiative to eliminate all-cause preventable harm using high reliability science to create a culture of safety. To date, nearly 3,000 hospital staff, leaders, and physicians have been trained in high reliability science and behaviors. All acute care hospitals are also participating in Partnership for

Patients, a national initiative to eliminate preventable patient harm by 20% and avoidable readmissions by 40%. Engagement in these collaboratives builds upon hospitals' prior work. Working collaboratively, hospitals committed to eliminating central line-associated bloodstream infections, catheter-associated urinary tract infections, and surgical-site infections.

Successful implementation of HAI prevention collaboratives is dependent upon executive leadership guiding overall institutional commitment to foster, promote, and support collaborative goals of improvement. Hospitals have also implemented their own local prevention activities to eliminate HAI based on needs identified within their facilities, frequently focusing in hand hygiene.

Public Information Campaigns – the HAI program has launched two public information campaigns to inform the public about how to prevent HAIs. The 2008 "Two Hands" campaign focused on informing both healthcare providers and the public that hand hygiene is the most important and useful way to prevent the spread of most HAIs, and that hand hygiene is important to prevent the spread of communicable diseases (such as influenza) in the community. In 2011, the HAI program hired a marketing company to promote infection prevention. The marketing company devised a new slogan for new hand hygiene/HAI prevention "It's good for you, Connecticut" public awareness campaign. Bus cards, public service announcements, fact sheets, posters, and public relations were created. The DPH and the marketing company created fact sheets for physicians and patients, bookmarks, tent cards and brochures, that each contains a message pertaining to infection control. An electronic copy of each of the different print materials was burned to a CD as well.

Antimicrobial resistance – In the recent report, *Antimicrobial Resistance Threats in the United States, 2013*, the CDC's Director, Dr. Thomas Frieden, called Antimicrobial Resistance "...one of our most serious health threats." CDC estimates that 2 million persons in the US get an antimicrobial resistant infection and that 23,000 die each year. In addition, due to inappropriate or injudicious use of antibiotics strains of multi-resistant pathogens have arisen that are pan-resistant, they cannot be treated by any available antibiotics, raising the specter that without a concentrated effort to promote appropriate antibiotic use, it is conceivable that we might at least in part return to the pre-antibiotic era. In addition to antimicrobial resistance per se, the increase of *Clostridium difficile*, a non-resistant pathogen facilitated by prior antibiotic use has become the most common HAI pathogen and a significant public health threat. To determine the magnitude of The HAI program tracks reports of Vancomycin Resistant Enterococci (VRE) from clinical laboratories in the state. *Clostridium difficile* is tracked as well. Both the HAI program and the ID Section's Active Bacteria Core Surveillance program track Methicillin-resistant *Staphylococcus aureus* (MRSA). Assessment had planning has been done to determine whether Carbapenem-resistant Enterobacteriaceae, highly-resistant gram negative bacteria should be made reportable. Similarly to other HAIs, prevention can be fostered by concerted action of healthcare facilities throughout the healthcare system and the state. This past year, two important prevention collaboratives were launched in Connecticut. One was a antimicrobial stewardship collaborative and the other addressed the issue of *Clostridium difficile*. The first collaborative is made up of communities of healthcare providers across the healthcare continuum (acute care hospitals, long-term care, home health agencies, clinicians, and other providers of care) that care for the same patients. This project, facilitated by Qualidigm, the Centers for Medicare & Medicaid Services designated Quality Improvement Organization (QIO) for Connecticut, is developing innovative methods of reducing antibiotic resistance through stewardship programs. The second uses quality improvement methodology to improve infection control processes in the long-term care setting, with a specific focus on reducing *Clostridium difficile* infections.

The use of Quality Improvement (QI) methods in healthcare is a cutting-edge activity that DPH is promoting throughout DPH and the public health system in Connecticut as a whole.

More details about the HAI Program's activities and the status of HAIs in Connecticut are available on the HAI Program website:

<http://www.ct.gov/dph/cwp/view.asp?a=3136&q=417318>

■ C. MAIN PROPOSAL COMPONENTS

Under the direction of the HAI Program, this request for proposals seeks to identify organizations possessing the capacity to develop and implement successful antimicrobial stewardship project in the outpatient practices of healthcare providers in that group that have prescribing authority (e.g., physicians, PA, APRNs).

1. Cover Sheet, Contractor Information, Notification to Bidders

The proposal must contain a completed Cover Sheet, Contractor Information Form, and a signed Notification to Bidders Form, which are included in the attached Application Forms.

2. Organizational Requirements

Applications will be accepted from healthcare ambulatory clinical group practices. These can be independent provider groups, primary care networks or groups associated with a healthcare facility (e.g., an acute care hospital or hospital system), or a community health center.

3. Services to be Provided

This request for proposals seeks to identify an organization possessing the capacity to develop and implement successful antimicrobial stewardship project in the outpatient practices of their member healthcare providers with prescribing authority (e.g., physicians, PA, APRNs).

A multidimensional effort is required to address the problem of antibiotic resistance and promote appropriate antibiotic use around the country.

The Centers for Disease Control and Prevention (CDC) has taken a national leadership role in facilitating the appropriate use of antibiotics to prevent resistance and ensure they remain effective, and to prevent other adverse events. The CDC has developed two campaigns to make best practices widely available, and to focus the efforts of all concerned about this serious public health problem. The *Get Smart: Know When Antibiotics Work* campaign serves the needs of patients for information on why antimicrobial resistance is a serious risk to their health and how to work effectively in their own behalf with their healthcare providers to promote the judicious use of antimicrobials. The *Get Smart for Healthcare* is the companion effort to serve the need of healthcare professionals for information to empower them to prescribe antimicrobials judiciously and to educate their patients on why this is important both the health of the individual patient, but also to the public at large. As the CDC notes, this individual healthcare decision can affect the health of all. Each website is a compendium of educational information, guidance, and other educational and technical assistance materials, as well as promotional and media tools. They also promote Get Smart About Antibiotics Week, an annual observance that started in 2008, and will be held next November 18-24, 2013. To access these campaigns, visit the following CDC websites:

- Get Smart: Know When Antibiotics Work: <http://www.cdc.gov/getsmart/>

- Get Smart for Healthcare: <http://www.cdc.gov/getsmart/healthcare/>

The CDC notes there are many opportunities to collaborate in promoting appropriate antibiotic use, including, but not limited to:

- Providing education to healthcare consumers, and providers (especially those with the authority to prescribe antibiotics and other antimicrobials, which are also subject to resistance)
- Use of CDC educational materials
- Distributing healthcare provider detailing sheets reviewing appropriate use guidelines
- Developing local level appropriate antibiotic use campaigns, including educational products
- Collaborating with Get Smart and local level programs on projects
- Exchanging in-kind services with Get Smart or local level campaigns
- Providing assistance to local level campaigns in producing educational materials or sponsoring events
- Delivering presentations on appropriate use to interested parties
- Sharing information and resources with CDC and other partners
- Use of CDC national media campaign products
- Becoming a Get Smart partner

Required services:

- 1) Form a project advisory group made up of providers, patient advocate(s) or representatives, the organization's Information Technology staff, staff responsible for this project, administration, and leadership to review the work plan and work as it progress, and advise project staff.
- 2) Review and assess the CDC *Get Smart: know When Antibiotics Work* and the CDC *Get Smart for Healthcare* websites (<http://www.cdc.gov/getsmart/> and <http://www.cdc.gov/getsmart/healthcare/>), including links on those websites to educational materials at CDC and state level Get Smart programs (e.g., Colorado). Use these materials and resources as is, or adapted, to the extent possible. Before use, obtain originator's permission for use of any document or other material not in the public domain.
- 3) Develop a knowledge, attitude, behavior assessment (choose a methodology, write a protocol, develop data collection instruments, and database). Assess current baseline prescribing practices through a knowledge, behavior, attitude self-report survey of a sample of providers and patients, or alternatively, through focus groups of providers and of patients. Incorporate these findings into the project plan.
- 4) Develop and launch a work plan for the project that will include measurable objectives, determine educational sessions and distribution of materials for providers and patients. This work plan will be a revision of the contractor's work plan submitted in response to this RFP, incorporating relevant findings from the baseline assessment of provider and patient knowledge, attitude and behaviors and the in-depth review of the *Get Smart* materials.
- 5) Track the volume of antibiotics prescribed in aggregate (or in a sample of providers); especially for high use indications (pediatric otitis media, urinary tract infections) based on provider network billing and electronic medical record capabilities. If practical, assess key indicators of appropriateness of antibiotic prescribing through objective data (e.g., using electronic chart review/data mining to determine imaging before

treatment of sinusitis with antibiotics, signs and symptoms associated with a positive urine culture before treatment, etc.).

- 6) Implement provider education on the appropriate and judicious use of antimicrobials, especially those providers with prescribing authority. Make circuit riding “detailing” visits to providers to deliver educational sessions and to distribute educational materials. Funding for supplies and materials will be primarily used for reproduction of *Get Smart* (*Get Smart for Healthcare* and *Get Smart: Know When Antibiotics Work*) materials for distribution during educational sessions.
- 7) Provide information/programming to patients that are culturally and linguistically appropriate, including all education materials.
 - a. Give providers scripts or other Get Smart aides to address antimicrobial stewardship with their patients.
 - b. Provide education for patients (e.g., posters on walls, videos in waiting rooms, counseling by providers)
- 8) Assess patient and provider satisfaction with the project and KABB at the end of the project.
- 9) Become a *Get Smart* partner – contact the CDC Get Smart program staff to register as a partner and provide requested information for registration. Registration as a *Get Smart* partner does not obligate the organization to any specific course of action, but the organization’s name will be listed on the *Get Smart* website, identifying the organization as a partner.
- 10) Submit a written narrative reports that demonstrates program progress on the planned activities and measurable objectives detailed in the project work plan for the first three months of the project. Submit a final report within 30 days of the end of the six-month project.

Approximate timeline for the contact deliverables:

- 1) Contractor chosen and contract executed by January 1, 2014.
- 2) Baseline assessment completed, assessment report and revised work plan delivered to DPH by April 1, 2014.
- 3) *Get Smart* materials distributed and circuit riding completed by July 15, 2014.
- 4) Follow-up knowledge attitude and behaviors assessment, and patient and provider satisfaction assessment completed by July 31, 2014.
- 5) Final report by August 31, 2014.

3. Staffing Requirements

The bidder will identify key personnel who will be providing services if awarded a contract under this request for proposals process. Identify one person as a sole point of contact of the Department. Indicate the qualification of key staff to provide services outlined in the RFP and describe the supervision, management and training of staff.

Include résumés of all key staff involved in the proposed project.

4. Data and Technology Requirements

As part of the activities under this project the Proposer may be expected to develop and collect data using Survey Monkey or similar online survey and data analysis tool. The Proposer will also need to be capable of collecting and analyzing the Proposers own database relevant to provider prescribing practice. The Proposer will be responsible for collecting and inputting the necessary data into the database once the information has been collected. Data need to be checked, cleaned and submitted via e-mail to the Department according to the contract reporting schedule.

5. Reporting Requirements:

The Contractor will receive payments based on program budgeted line items.

Quarterly expenditure reports will be required that must include invoices and receipts for all purchases or services made with grant funds.

Quarterly submission of narrative progress reports.

D. COST PROPOSAL COMPONENT

1. Financial Requirements,

One up-front payment will be made to all contractors for start-up costs and materials purchases.

All costs must be included in the contract price. Competitiveness of the budget will be considered as part of the proposal review process

The proposal must identify and provide contact information for all potential subcontractors used to meet the services required for this RFP.

The contractor will be paid on a budget basis. The Department shall process payments based on an itemized budget that has a justification for each line item on the budget forms included in the Application (Budget Justification Schedule A). All costs (salaries, travel, printing, medical materials, etc.) must be included in the contract price.

Line item expenditure reports, receipts and invoices for services provided must be completed and submitted to the Department on a quarterly basis.

These funds cannot be used for capital purchases or for the purchase of computer equipment.

2. Budget Requirements,

Indicate the total program cost.

Specify the number of providers and the number patients to be educated.

Should the number of proposed clients anticipated to be counseled not be met, the cost per client provided may be used to reconcile actual program costs and to determine funding to be returned to the Department.

The Budget Justification must indicate all program costs.

IV. PROPOSAL OUTLINE

Proposals submitted in response to the RFP must contain the following components, including a table of contents. Proposals must include all the components listed below, in the order specified, using the prescribed lettering and numbering scheme. Incomplete proposals will not be evaluated.

	Page
A. Cover Sheets (Appendix – Sections A. and B. Applicant and Contractor Information).	
B. Table of Contents	
C. Declaration of Confidential Information	
D. Conflict of Interest - Disclosure Statement	
E. Executive Summary . (Maximum two pages).	
F. Main Proposal	
1. Organizational Profile	
a. Fill out table	
b. Attach Letters of Collaboration from Community Partners (if relevant).	
2. Staffing Plan	
a. Fill out table	
b. Attach resumes	
4. Subcontractors	
a. Legal Name of Agency, Address, FEIN	
b. Contact Person, Title, Phone, Fax, E-mail	
c. Services Currently Provided	
d. Services To Be Provided Under Subcontract	
e. Subcontractor Oversight	
f. Subcontract Cost and Term	
5. Work Plan	
a. Fill out table	
G. Cost Proposal	
1. Financial Profile	
a. Annual Budget and Revenues	
b. Financial Standing	
c. Financial Management Systems	
d. Revenue Generation / Billing / Third Party Reimbursement.	
e. Other DPH Contracts.	
f. Any outstanding financial obligation with the Department	
2. Budget and Budget Narrative	
a. Narrative	
b. Line Item Budget Breakdown.	
c. Justification and Detail for each charge item	
d. Subcontractor Costs, including line item breakdown of those costs.	

- H. Appendices
 - a. Résumés of Key Personnel
 - b. Letters of Collaboration from active partners that will be part of this grant.

- I. Forms

The following additional forms located in the RFP Attachments must be submitted with the application:

- a. Work Plan Form
- b. Budget Justification and Schedule
- c. Workforce Analysis Form (Employer Information Report) EEO-1 (U.S. EEOC)
- d. Acknowledgment of Contract Compliance / Notification to Bidders (CHRO)
- e. Consulting Agreement Affidavit (OPM Ethics Form 5) ¹

¹ Attached when the contract resulting from this RFP has an anticipated value of \$50,000 or more in a calendar or fiscal year. The proposer must submit this certification to the Department with the proposal.

Connecticut Department of Public Health

V. APPENDICES

The following appendices are provided for your further information:

- *RFP evaluation and scoring form used by screening committee. 26*
- *Data collection forms. 28*
- *Model Contract Language for successful bidders 34*

*The information contained herein will be required of applicants awarded funding and will be requested during the contract development process. Some of the indicated information may be submitted electronically. **Do not include any of the forms included here with your proposal.***

1. *Nondiscrimination Certification Instructions 35*
2. *Nondiscrimination Certification 36*
3. *False Claims Act Notification 37*
4. *False Claims Act Policy 38*
5. *False Claims Act Procedure 41*
6. *SEEC Form 11 44*

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TECHNICAL CRITERIA WORKSHEET

RFP # 2014-0909 Get Smart Antimicrobial Use in Provider Group Outpatient Practices in Connecticut

Applicant

	Max Points	Comments	Reviewer Score
Organizational Profile and Service Area 25%, 25 Points			
<p>The extent to which the applicant has provided or demonstrated, and its appropriateness for this project:</p> <ol style="list-style-type: none"> 1. A general description of the applicant organization, including its purpose, geographic service areas, physical facilities, services provided, administrative services that support the providers, governance structure, number and type of staff (in particular providers with prescribing authority), past history of contracts with the Department, and length of time in operation. 2. For applicant organizations that have previously contracted with the Department, consider the past history of program success, effectiveness and compliance with Department requirements. 3. A clear and reasonable and description of how an antimicrobial stewardship program will fit into the mission of the organization, and any synergy it may have with current activities. 4. Experience of the organization and key staff in assessing the quality of ambulatory care. 5. Capacity of the organization to provide assessment, evaluation, training, and data collection and management services. 6. Experience with the medical community outside the organization on other collaborative projects. 7. A description of any plans to collaborate with other agencies or subcontractors on this project. If such collaborations are planned, are letters of support submitted and do the letters of support specify how the collaborating organization will support the project, and will this support reasonably improve the chance of success of the project? 8. A complete Cover Sheet and Applicant Information Form. 	25		
Staffing Plan and Subcontractors 15%, 15 Points			
<p>Note: Resumes for all staff that will be paid for work on this project and the direct supervisor(s) of these project staff should be attached to this application. As part of its evaluation of the Staffing Plan, the Screening Committee will consider the proposer's demonstrated commitment to affirmative action, as required by the Regulations of CT State Agencies § 46A-68j-30(10).</p> <ol style="list-style-type: none"> 1. The extent to which adequate time is allocated to manage the services to be provided in the work plan. 	15		

<ol style="list-style-type: none"> 2. The extent to which the profile of staff and any subcontractors are clear and adequate to manage the services to be provided. 3. Is key staff qualified to provide services outlined in the RFP and is the supervision, management and training of staff described and adequate? 4. Does the proposer have a qualified program administrator responsible for overseeing the overall operation of the program? 5. Does the proposer have a qualified "circuit rider" responsible for providing services to participating providers? 6. Does the proposer have qualified data systems staff to oversee the day-to-day data functions; entering data and submitting required reports while ensuring data quality and accuracy? 			
Work Plan 35%, 35 points			
<ol style="list-style-type: none"> 1. The work plan must include sufficient narrative description for reviewers to understand how services will be carried out by the applicant. Proposers using repetitive direct quotes from the RFP may have points deducted for responsiveness. 2. The extent to which a thorough work plan is presented with measurable objectives and detailed, logical, realistic and feasible time lines. 3. The geographical service area as well as from what location(s) those services will be provided is clearly described and reasonable. 4. The extent the Proposer adequately demonstrated how it will measure and/or prove the completion of major tasks, functions, or activities (e.g. identification of key events/outcomes/deliverables). 5. The extent to which services to be provided are described clearly and responds to all the requested activities detailed in this RFP: <ol style="list-style-type: none"> a. Project steering group - membership, role, meeting/consultation schedule. b. Get Smart review - website assessment. c. Assessment of provider and patient knowledge, attitudes, and behaviors vis-à-vis judicious and appropriate use of antimicrobials d. Provider education plan, methods, activities, including materials distribution and "circuit riding/detailing" e. Approach to providing appropriate antimicrobial use education to patients that is culturally and linguistically appropriate. f. Services for the project use CDC's <i>Get Smart</i> and <i>Get Smart for Healthcare</i> materials and guidelines. g. Partnership with other medical organizations or facilities (if planned) h. Data collection and analysis of prescribing data. i. Follow-up assessment of provider and patient knowledge, attitudes, and behaviors vis-à-vis judicious and appropriate use of antimicrobials at the end of the project. j. Participant satisfaction assessment methods. 	35		
Budget and Budget Narrative 25%, 25 points			
<ol style="list-style-type: none"> 1. The extent to which the budget follows line item eligibility guidelines. 	15		

2. The completeness and reasonableness of the justification of budget line items.	10		
TOTAL	100		

Nondiscrimination Certification Instructions

The governing body of your **corporation, company, or entity** must adopt policies and/or pass a resolution adopting and supporting nondiscrimination agreements and warranties as indicated in the *attached* Certification form.

If an **individual**, you must certify that you will adhere to the required nondiscrimination agreements and warranties, as indicated in the *attached* Certification form.

Individual Use FORM A	Corporation, Company or Entity <i>Use FORM B (under \$50,000) or FORM C (\$50,000 or more)</i>
For an individual, enter your full legal name and address of residence.	Enter the legal Name and Title of the Authorized Signatory if not already included on the form. This is the person <u>named</u> in the Secretarial Certification as authorized to sign. Alternately, the person authorized to certify the authorized signatory may sign this certification. If this option is chosen, the individual signing the secretarial certification and the nondiscrimination certification should be the same individual.
This does not apply for contracts with individuals.	Enter Corporation / Contractor Name with no abbreviations unless it is legally abbreviated in the charter if not already included on the form. Exception: Corp. is a legal abbreviation.
This does not apply for contracts with individuals.	Enter State or Commonwealth of Incorporation where required if not already included on the form
Enter the <u>Day, Month, Year</u> on which the certification is signed. This date <u>must be the same or later</u> than the date the Contract is signed	Enter the <u>Day, Month, Year</u> on which the certification is signed. This date <u>must be the same or later</u> than the date the Contract is signed
Enter the Signer's Signature.	Enter the Signer's Signature.

IMPORTANT

Name of Signer must be typed **exactly** the same at the beginning of Document as at the end of the Document. Signature must match typed name **exactly**.

It is **not** necessary to have the form notarized unless an area for such appears on the form. Notarization is required, however, if so indicated on the form.

The requirement for notarization exists for contracts including funding in excess of \$50,000 per year.

The enclosed form is an official document approved by the Connecticut Office of Attorney General. Substitute documents are not acceptable.

Any type of correction fluid or tape is not acceptable! ***

*** We can supply additional forms if necessary.

cert.instr. 7/10/09

Form C
7/8/09

INSTRUCTIONS:

AFFIDAVIT:

Commission Expiration Date

FALSE CLAIMS ACT
COMPLIANCE NOTIFICATION

This Contract requires compliance with The Deficit Reduction Act (“Act”) of 2005, which requires that the contractor or “qualified provider” receiving the contract comply with the Department’s False Claims Act Policy and Procedure as follows:

1. Review, print, and maintain on file the following Department’s False Claims Act Policy and False Claims Act Procedure.
2. Provide appropriate notice of the requirements of the Policy and Procedure by providing copies of the Department’s False Claims Policy and False Claims Procedure to all employees of your organization, including officers and officials as well as subcontractors providing services funded by this Contract, in accordance with the requirements of Section 4.3.3 of the Department’s False Claims Act Procedure.

Do not return the False Claims Policy or False Claims Procedure to the Department. Your signature on the executed Contract confirms your receipt and compliance with the Department’s False Claims Act compliance requirement.

 <p>DPH Connecticut Department of Public Health</p>	<h2>False Claims Act (Policy)</h2>	<p>PL-CGMS C-001 Revision: 1.0 Effective Date: 05/21/2010</p>
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APPROVAL SIGNATURES		DATE
J. Robert Galvin, M.D., M.P.H. (original signature on file)	Commissioner of Public Health	05/21/2010

REVISION HISTORY			
Revision	Description of Change	Author	Effective Date
Basic	Initial Release	Bruce Wallen	05/21/2010

REFERENCE DOCUMENTS	
Document	Title
The Deficit Reduction Act ("Act") of 2005	Section 6032
United States Code (U.S.C.)	Sections 3729-3733
Connecticut General Statutes (C.G.S.)	Section 53a-290 Vendor Fraud
Connecticut General Statutes (C.G.S.)	Section 4-61dd Whistleblower
Connecticut General Statutes (C.G.S.)	Section 31-51m Blacklisting
Connecticut General Statutes (C.G.S.)	Section 17b-127 General Assistance

	<h2 style="text-align: center;">False Claims Act (Policy)</h2>	<p>PL-CGMS C-001 Revision: 1.0 Effective Date: 05/21/2010</p>
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1.0 Purpose

The Deficit Reduction Act ("Act") of 2005 is the federal government's legislative effort to control spending for entitlement programs, such as Medicaid. The Act seeks to control spending by reducing federal overpayments for prescription drugs and medical services, thereby improving the integrity of federally funded entitlement programs.

2.0 Scope

Section 6032 of the Act states that any entity, such as the Department of Public Health (Department), which receives or makes payments under a state plan approved under Title XIX or under a waiver of such plan, totaling at least \$5,000,000 annually, is required to establish written policies providing detailed information about the False Claims Act ("FCA") and any state false claims laws to all Department employees, contractors and agents. The Department is also required to establish and inform all employees, contractors, qualified providers and agents about the Department's policies and procedures for the detection and prevention of fraud, waste and abuse, the protection afforded to any person who reports an incident of a false claim to a regulatory body (e.g., Whistleblower Protection) and any civil or criminal penalties for false claims.

3.0 Definitions and Acronyms

Specialized acronyms and definitions identified in this contract procedure are defined below.

3.1 Acronyms

<u>"CGMS"</u>	The Connecticut Department of Public Health, Contracts & Grants Management Section
<u>"Department"</u>	The State of Connecticut Department of Public Health
<u>"FCA"</u>	False Claims Act
<u>"PFCRA"</u>	Program Fraud Civil Remedies Act

3.2 Definitions

Claim - means any request or demand, whether under a contract or otherwise, for money or property which is made by a contractor, grantee, or other recipient if the United States government provides any portion of the money or property which is requested or demanded or if the government will reimburse such contractor, grantee, or other recipient for any portion of the money or property which is requested or demanded.

Contractor or Agent - means any contractor, subcontractor, agent, qualified vendor, consumer or family member who act as an employer or other person which or who, on behalf of the entity, furnishes, or otherwise authorizes the furnishing of, Medicaid health care items or services, performs billing or coding functions, or is involved in the monitoring of health care provided by the entity.

Employee - means any officer or employee of the entity, contractor, or agent.

Entity - means a governmental agency, organization, unit, corporation, partnership or other business arrangement, including Medicaid managed care organizations, whether for profit or not-for-profit, which receives or makes payments, under a state plan approved under Title XIX or under any waiver of such plan, totaling at least \$5,000,000 annually.

Knowing and Knowingly - means that a person with respect to information 1) has actual knowledge of the information; 2) acts in deliberate ignorance of the truth or falsity of the information; or 3) acts in reckless disregard of the truth or falseness of the information.

 <p>Keeping Connecticut Healthy</p> <p>DPH</p> <p>Connecticut Department of Public Health</p>	<p>False Claims Act (Policy)</p>	<p>PL-CGMS C-001 Revision: 1.0 Effective Date: 05/21/2010</p>
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4.0 Compliance

4.1 False Claim Act

The FCA prohibits any person, firm, corporation or entity from knowingly presenting, or causing to be presented, a false claim or statement to a federally funded program, including Medicaid, or conspiring to defraud the federal government. Any person, company or entity that acts in deliberate ignorance of or with reckless disregard of the truth of such information is considered to have acted knowingly.

The civil penalty for violating the FCA is a fine of not less than \$5,000 and not more than \$10,000 per violation. The person, company or entity may also be fined an additional three times the amount of damages sustained by the federal government. The PFCRA also provides that any person or company that commits fraud by making a false statement or claim can be assessed a penalty of \$5,000 per false claim or statement in addition to the penalties available under the FCA.

A person may bring a civil action for violating the FCA on behalf of said person and the United States government. If the federal government proceeds with an action brought by such person then that person shall receive at least 15 percent but not more than 25 percent of the proceeds of the action or settlement. If the federal government does not proceed with the action and the person initiating the action proceeds, then the person bringing the action shall receive a reasonable amount, to be determined by the court, but not less than 25% and not more than 30% of the proceeds of the action or settlement.


The FCA prohibits retaliation by an employer against an employee for bringing a false claim action or participating in such action (Whistleblower Protection). Any employee subject to retaliation by an entity, contractor or agent shall be entitled to all relief necessary to make the employee whole, including but not limited to reinstatement, two times the amount of back pay, interest on back pay and special damages.

4.2 State False Claim Related Acts

Under Connecticut's Vendor Fraud statute it is illegal for a person on his own behalf or on the behalf of an entity, with intent, to fraudulently provide goods or services to a beneficiary or recipient under Title XIX or to fraudulently receive goods or services. Connecticut law also prohibits any vendor from fraudulently providing services or goods for any recipient of General Assistance. The State Whistleblower law provides any employee who reports a suspected violation of state or federal law with protection against retaliation by the employer. State law also prohibits any person, corporation, state or political subdivision from blacklisting any employee.

4.3 Compliance Reporting


All DPH employees, contractors and agents, are required to report fraud, waste and abuse to: The Department of Public Health, Contracts & Grants Management Section, 410 Capitol Avenue, MS#13GCT, P.O. Box 340308, Hartford, CT 06134-0308.

 <p>Keeping Connecticut Healthy</p> <p>DPH</p> <p>Connecticut Department of Public Health</p>	<h2>False Claims Act (Procedure)</h2>	<p>PR-CGMS C-001 Revision: 1.0 Effective Date: 05/21/2010</p>
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APPROVAL SIGNATURES		DATE
J. Robert Galvin, M.D., M.P.H. (original signature on file)	Commissioner of Public Health	05/21/2010

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	<h2 style="text-align: center;">False Claims Act (Procedure)</h2>	<p>PR-CGMS C-001 Revision: 1.0 Effective Date: 05/21/2010</p>
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1.0 Purpose

This procedure provides guidance to the Department of Public Health on informing all employees, contractors and agents about the Department of Public Health False Claims Policy, PL-CGMS C-001.

2.0 Scope

This procedure applies to all Department of Public Health staff, and officers and employees of contractors, agents, qualified providers and subcontractors funded by the department.

3.0 Definitions and Acronyms

Specialized acronyms and definitions identified in this contract procedure are defined below.

3.1 Acronyms

<u>"CGMS"</u>	The Connecticut Department of Public Health, Contracts & Grants Management Section
<u>"Department"</u>	The State of Connecticut Department of Public Health
<u>"FCA"</u>	False Claims Act
<u>"PFCRA"</u>	Program Fraud Civil Remedies Act
<u>"POS"</u>	Purchase of Service Contract

3.2 Definitions

Claim - means any request or demand, whether under a contract or otherwise, for money or property which is made by a contractor, grantee, or other recipient if the United States government provides any portion of the money or property which is requested or demanded, or if the government will reimburse such contractor, grantee, or other recipient for any portion of the money or property which is requested or demanded.

Contractor or Agent - means any contractor, subcontractor, agent, qualified vendor, consumer or family member who act as an employer or other person which or who, on behalf of the entity, furnishes, or otherwise authorizes the furnishing of, Medicaid health care items or services, performs billing or coding functions, or is involved in the monitoring of health care provided by the entity.


Employee - means any officer or employee of the entity, contractor or agent.

Entity - means a governmental agency, organization, unit, corporation, partnership or other business arrangement, including Medicaid managed care organizations, whether for profit or not-for-profit, which receives or makes payments, under a state plan approved under Title XIX or under any waiver of such plan, totaling at least \$5,000,000 annually.

Knowing and Knowingly - means that a person with respect to information 1) has actual knowledge of the information; 2) acts in deliberate ignorance of the truth or falsity of the information; or 3) acts in reckless disregard of the truth or falseness of the information.

Purchase of Service Contract - Previously Human Service Contract, a contract document used to procure direct client services to populations served by the Department over a defined period and for an agreed upon maximum price.

Subcontractor – See "Contractor or Agent" above.

	False Claims Act (Procedure)	PR-CGMS C-001 Revision: 1.0 Effective Date: 05/21/2010
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4.0 Process

4.1 Dissemination to the Department's New Employees

- 4.1.1** The Department's Human Resources staff shall present and provide all newly hired Department employees with a copy of the False Claims Act Policy and Procedure during the new employee orientation.
- 4.1.2** Each new Department employee must acknowledge receipt of the False Claims Act Policy and Procedure by signing an acknowledgement that they received it. The acknowledgement shall be maintained in their personnel file.

4.2 Dissemination to the Department's Existing Employees

Each existing Department employee shall receive a copy of the Department's False Claims Act Policy and Procedure and must sign an acknowledgement that they have received it. The acknowledgement shall be maintained in their personnel file.

4.3 Dissemination to Contractors and Qualified Providers

- 4.3.1** CGMS shall include the Department's False Claims Act Policy and Procedure in all POS contracts between the Department and its contractors and agents.
- 4.3.2** Contractors and agents shall inform all employees providing services funded by the contract of the policy and procedure and obtain acknowledgement of receipt.
- 4.3.3** Execution of the contract by a contractor or agent, via authorized signature, shall indicate acceptance of and compliance with the Department's False Claims Policy and Procedure in accordance with Part II, Section C.4, (Terms and Conditions, Contractor Obligations, Federal Funds) of the POS Contract.
- 4.3.4** Contractors and agents under contract with the Department shall inform all subcontractors, providing services funded by the contract, of the policy and procedure and obtain acknowledgement of receipt either via inclusion of a contract term/condition in the sub-contractual agreement as in 4.3.3 above, and execution of such subcontract, or via separate acknowledgement.

5.0 Records

- 5.1** The following records shall be maintained, generated, or updated, and filed by the Department in accordance with this procedure and CGMS record retention requirements and schedules. Contractors shall maintain records according to their established record retention schedules.

Record Name	Responsible	Retention Req.	Location
Employee acknowledgement of receipt of False Claims Policy and Procedure	Human Resources Office	Until employee termination	Employee File
Fully Executed Contract Document	CGMS	3 Yrs. From end date of contract(s)	CGMS Contract File

Notice to Executive Branch State Contractors and Prospective State Contractors of Campaign Contribution and Solicitation Limitations

This notice is provided under the authority of Connecticut General Statutes §9-612(g)(2), as amended by P.A. 10-1, and is for the purpose of informing state contractors and prospective state contractors of the following law (italicized words are defined on the reverse side of this page).

CAMPAIGN CONTRIBUTION AND SOLICITATION LIMITATIONS

No *state contractor, prospective state contractor, principal of a state contractor or principal of a prospective state contractor*, with regard to a *state contract* or *state contract solicitation* with or from a state agency in the executive branch or a quasi-public agency or a holder, or principal of a holder of a valid prequalification certificate, shall make a contribution to (i) an exploratory committee or candidate committee established by a candidate for nomination or election to the office of Governor, Lieutenant Governor, Attorney General, State Comptroller, Secretary of the State or State Treasurer, (ii) a political committee authorized to make contributions or expenditures to or for the benefit of such candidates, or (iii) a party committee (which includes town committees).

In addition, no holder or principal of a holder of a valid prequalification certificate, shall make a contribution to (i) an exploratory committee or candidate committee established by a candidate for nomination or election to the office of State senator or State representative, (ii) a political committee authorized to make contributions or expenditures to or for the benefit of such candidates, or (iii) a party committee.

On and after January 1, 2011, no state contractor, prospective state contractor, principal of a state contractor or principal of a prospective state contractor, with regard to a state contract or state contract solicitation with or from a state agency in the executive branch or a quasi-public agency or a holder, or principal of a holder of a valid prequalification certificate, shall **knowingly solicit** contributions from the state contractor's or prospective state contractor's employees or from a *subcontractor* or *principals of the subcontractor* on behalf of (i) an exploratory committee or candidate committee established by a candidate for nomination or election to the office of Governor, Lieutenant Governor, Attorney General, State Comptroller, Secretary of the State or State Treasurer, (ii) a political committee authorized to make contributions or expenditures to or for the benefit of such candidates, or (iii) a party committee.

DUTY TO INFORM

State contractors and prospective state contractors are required to inform their principals of the above prohibitions, as applicable, and the possible penalties and other consequences of any violation thereof.

PENALTIES FOR VIOLATIONS

Contributions or solicitations of contributions made in violation of the above prohibitions may result in the following civil and criminal penalties:

Civil penalties—Up to \$2,000 or twice the amount of the prohibited contribution, whichever is greater, against a principal or a contractor. Any state contractor or prospective state contractor which fails to make reasonable efforts to comply with the provisions requiring notice to its principals of these prohibitions and the possible consequences of their violations may also be subject to civil penalties of up to \$2,000 or twice the amount of the prohibited contributions made by their principals.

Criminal penalties—Any knowing and willful violation of the prohibition is a Class D felony, which may subject the violator to imprisonment of not more than 5 years, or not more than \$5,000 in fines, or both.

CONTRACT CONSEQUENCES

In the case of a state contractor, contributions made or solicited in violation of the above prohibitions may result in the contract being voided.

In the case of a prospective state contractor, contributions made or solicited in violation of the above prohibitions shall result in the contract described in the state contract solicitation not being awarded to the prospective state contractor, unless the State Elections Enforcement Commission determines that mitigating circumstances exist concerning such violation.

The State shall not award any other state contract to anyone found in violation of the above prohibitions for a period of one year after the election for which such contribution is made or solicited, unless the State Elections Enforcement Commission determines that mitigating circumstances exist concerning such violation.

Additional information may be found on the website of the State Elections Enforcement Commission, www.ct.gov/seec. Click on the link to "Lobbyist/Contractor Limitations."

DEFINITIONS

“State contractor” means a person, business entity or nonprofit organization that enters into a state contract. Such person, business entity or nonprofit organization shall be deemed to be a state contractor until December thirty-first of the year in which such contract terminates. “State contractor” does not include a municipality or any other political subdivision of the state, including any entities or associations duly created by the municipality or political subdivision exclusively amongst themselves to further any purpose authorized by statute or charter, or an employee in the executive or legislative branch of state government or a quasi-public agency, whether in the classified or unclassified service and full or part-time, and only in such person's capacity as a state or quasi-public agency employee.

“Prospective state contractor” means a person, business entity or nonprofit organization that (i) submits a response to a state contract solicitation by the state, a state agency or a quasi-public agency, or a proposal in response to a request for proposals by the state, a state agency or a quasi-public agency, until the contract has been entered into, or (ii) holds a valid prequalification certificate issued by the Commissioner of Administrative Services under section 4a-100. “Prospective state contractor” does not include a municipality or any other political subdivision of the state, including any entities or associations duly created by the municipality or political subdivision exclusively amongst themselves to further any purpose authorized by statute or charter, or an employee in the executive or legislative branch of state government or a quasi-public agency, whether in the classified or unclassified service and full or part-time, and only in such person's capacity as a state or quasi-public agency employee.

“Principal of a state contractor or prospective state contractor” means (i) any individual who is a member of the board of directors of, or has an ownership interest of five per cent or more in, a state contractor or prospective state contractor, which is a business entity, except for an individual who is a member of the board of directors of a nonprofit organization, (ii) an individual who is employed by a state contractor or prospective state contractor, which is a business entity, as president, treasurer or executive vice president, (iii) an individual who is the chief executive officer of a state contractor or prospective state contractor, which is not a business entity, or if a state contractor or prospective state contractor has no such officer, then the officer who duly possesses comparable powers and duties, (iv) an officer or an employee of any state contractor or prospective state contractor who has *managerial or discretionary responsibilities with respect to a state contract*, (v) the spouse or a *dependent child* who is eighteen years of age or older of an individual described in this subparagraph, or (vi) a political committee established or controlled by an individual described in this subparagraph or the business entity or nonprofit organization that is the state contractor or prospective state contractor.

“State contract” means an agreement or contract with the state or any state agency or any quasi-public agency, let through a procurement process or otherwise, having a value of fifty thousand dollars or more, or a combination or series of such agreements or contracts having a value of one hundred thousand dollars or more in a calendar year, for (i) the rendition of services, (ii) the furnishing of any goods, material, supplies, equipment or any items of any kind, (iii) the construction, alteration or repair of any public building or public work, (iv) the acquisition, sale or lease of any land or building, (v) a licensing arrangement, or (vi) a grant, loan or loan guarantee. “State contract” does not include any agreement or contract with the state, any state agency or any quasi-public agency that is exclusively federally funded, an education loan, a loan to an individual for other than commercial purposes or any agreement or contract between the state or any state agency and the United States Department of the Navy or the United States Department of Defense.

“State contract solicitation” means a request by a state agency or quasi-public agency, in whatever form issued, including, but not limited to, an invitation to bid, request for proposals, request for information or request for quotes, inviting bids, quotes or other types of submittals, through a competitive procurement process or another process authorized by law waiving competitive procurement.

“Managerial or discretionary responsibilities with respect to a state contract” means having direct, extensive and substantive responsibilities with respect to the negotiation of the state contract and not peripheral, clerical or ministerial responsibilities.

“Dependent child” means a child residing in an individual's household who may legally be claimed as a dependent on the federal income tax of such individual.

“Solicit” means (A) requesting that a contribution be made, (B) participating in any fund-raising activities for a candidate committee, exploratory committee, political committee or party committee, including, but not limited to, forwarding tickets to potential contributors, receiving contributions for transmission to any such committee or bundling contributions, (C) serving as chairperson, treasurer or deputy treasurer of any such committee, or (D) establishing a political committee for the sole purpose of soliciting or receiving contributions for any committee. Solicit does not include: (i) making a contribution that is otherwise permitted by Chapter 155 of the Connecticut General Statutes; (ii) informing any person of a position taken by a candidate for public office or a public official, (iii) notifying the person of any activities of, or contact information for, any candidate for public office; or (iv) serving as a member in any party committee or as an officer of such committee that is not otherwise prohibited in this section.

“Subcontractor” means any person, business entity or nonprofit organization that contracts to perform part or all of the obligations of a state contractor's state contract. Such person, business entity or nonprofit organization shall be deemed to be a subcontractor until December thirty first of the year in which the subcontract terminates. “Subcontractor” does not include (i) a municipality or any other political subdivision of the state, including any entities or associations duly created by the municipality or political subdivision exclusively amongst themselves to further any purpose authorized by statute or charter, or (ii) an employee in the executive or legislative branch of state government or a quasi-public agency, whether in the classified or unclassified service and full or part-time, and only in such person's capacity as a state or quasi-public agency employee.

“Principal of a subcontractor” means (i) any individual who is a member of the board of directors of, or has an ownership interest of five per cent or more in, a subcontractor, which is a business entity, except for an individual who is a member of the board of directors of a nonprofit organization, (ii) an individual who is employed by a subcontractor, which is a business entity, as president, treasurer or executive vice president, (iii) an individual who is the chief executive officer of a subcontractor, which is not a business entity, or if a subcontractor has no such officer, then the officer who duly possesses comparable powers and duties, (iv) an officer or an employee of any subcontractor who has managerial or discretionary responsibilities with respect to a subcontract with a state contractor, (v) the spouse or a dependent child who is eighteen years of age or older of an individual described in this subparagraph, or (vi) a political committee established or controlled by an individual described in this subparagraph or the business entity or nonprofit organization that is the subcontractor.

VI. FORMS – ATTACHMENTS
APPLICATION FORMS

APPLICATION FORMS: The information and forms included in this section are required for submission of a proposal. The included forms must be completed and included in the proposal submission as applicable and directed however item numbers 9 and 12 may be submitted to the State of Connecticut Department of Administrative Services (DAS) Document Vault in accordance with existing procedures and within the statutorily required timeframes. If valid forms have been previously submitted they need not be submitted again but the proposal must clearly state that the electronic documents are available for viewing within the DAS Document Vault.

1. Proposal Cover Sheet.	47
2. Applicant Information Form (continuation)	48
3. Budget Summary Form Option A: Fee for Service.	49
4. Budget Summary Instructions and Forms: Budget Option B: Budget Basis 50 (Including Justification, Position, and Subcontractor Forms)	
5. Work Plan Form	56
6. OPM Consulting Agreement Affidavit .(Ethics Form 5).	58
8. Contract Compliance Policy Statement	60
9. Notification to Bidders	61
10. Workforce Analysis Form.	62

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REQUEST FOR PROPOSAL COVER SHEET
Get Smart Antimicrobial Use in Provider Group Outpatient
Practices in Connecticut
RFP # 2014-0909

ANTIMICROBIAL STEWARDSHIP IN OUTPATIENT CARE SERVICES IN CONNECTICUT

A. Applicant Information

Legal Name

Address

City/Town

State

Zip Code

Telephone No.

FAX No.

E-Mail Address

Contact Person: _____ Title: _____

Telephone No: _____

TOTAL PROGRAM COST: \$ _____

TOTAL NUMBER OF PROVIDERS: \$ _____

TOTAL NUMBER OF PATIENTS: \$ _____

I certify that to the best of my knowledge and belief, the information contained in this application is true and correct. The application has been duly authorized by the governing body of the applicant, the applicant has the legal authority to apply for this funding, the applicant will comply with applicable state and federal laws and regulations, and that I am a duly authorized signatory for the applicant.

Signature of Authorizing Official:

Date

Typed Name and Title

The applicant agency is the agency or organization, which is legally and financially responsible and accountable for the use and disposition of any awarded funds. Please provide the following information:

- Full legal name of the organization or corporation as it appears on the corporate seal and as registered with the Secretary of State
- Mailing address; Main telephone number; Fax number, if any-
- Principal contact person for the application (person responsible for developing application)
- Total program cost

The funding application and all required submittals must include the signature of an officer of the applicant agency who has the legal authority to bind the organization. The signature, typed name and position of the authorized official of the applicant agency must be included as well as the date on which the application is signed.

Applicant Information Form (continuation)

PLEASE LIST THE AGENCY CONTACT PERSONS RESPONSIBLE FOR COMPLETION AND SUBMITTAL OF:
Contract and Legal Documents/Forms:

Name	Title	Tel. No.
Street	Town	Zip Code
Email		Fax No.

Program Progress Reports:

Name	Title	Tel. No.
Street	Town	Zip Code
Email		Fax No.

Financial Expenditure Reporting Forms:

Name	Title	Tel. No.
Street	Town	Zip Code
Email		Fax No.

Incorporated: ☐ YES ☐ NO

Agency Fiscal Year:

--

Type of Agency: ☐ Public ☐ Private ☐ Other, Explain: _____☐ Profit ☐ Non-Profit

Federal Employer I.D. Number:

--

Town Code No:

--

Medicaid Provider Status: ☐ YES ☐ NO

Medicaid Number:

--

Minority Business Enterprise (MBE): ☐ YES ☐ NOWomen Business Enterprise (WBE): ☐ YES ☐ NO

Budget Summary

Budget

Budget Summary Instructions

A. Position Schedule #2a

Complete the schedule for all positions to be funded even if currently vacant.

B. Budget Summary Schedule A

1. Personnel (lines #1 - #2)

- a. Line #1 **Salary and Wages:** Enter the total salary charged, as listed on Position Schedule 2a.
- b. Line #2 **Fringe Benefits Line:** Enter the total fringe benefits charged, as listed on Position Schedule 2a.

2. Line #8 **Contractual (Subcontracts): Provide the total of all subcontracts and complete Subcontractor Schedule B.**

3. Lines #3 through #7, #9, and #10: Complete categories as appropriate,

4. Line #11: Other Expenses are any other types of expense that do not fit into the categories listed.

For example: Equipment. Please note that the state's definition of equipment is tangible personal property with a normal useful life of at least one year and a value of at least \$5,000 or more.

5. Line Item # 12 **Administrative and General Costs**

- a. Are defined as those costs that have been incurred for the overall executive and administrative offices of the organization or other expenses of a general nature that do not relate solely to any major cost objective of the overall organization. Examples of A&G costs include salaries of executive directors, administrative & financial personnel, accounting, auditing, management information systems, proportional office costs such as building occupancy, telephone, equipment, and office supplies. Please review the OPM website on Cost Standards for more information at:

http://www.opm.state.ct.us/finance/pos_standards/coststandards.htm.

- b. **Administrative and General Costs** must be itemized on the Budget Justification Schedule. Costs that have a separate line item in the Budget Summary may not be duplicated as an Administrative and General Cost. For example, if the Budget Summary includes an amount for telephone costs, this cannot also be included as an Administrative and General Cost.

6. **Other Program Income list any other program income, if appropriate, such as in-kind contributions, fees collected, or other funding sources and include brief explanation on Budget Justification.**

C. Budget Justification Schedule B

1. Please provide an explanation for each line item. This must include a detailed breakdown of the components that make up the line item and any calculation used to compute the amount.

For Example:

Line Item (Description)	Amount	Justification including Breakdown of Costs
Travel	\$730	2,000 miles @ .365 = \$730.00 outreach workers going to meetings and site visits.

*****Please note: If Laboratory Services is a line item, please supply a justification as to why a private laboratory is being used as opposed to the Connecticut State Laboratory.**

- For contractors who have subcontracts, a brief description of the purpose of each subcontract must be provided, and include schedule C as well.. Use additional sheets as necessary.

D. Subcontractor Schedule C--Detail

- All subcontractors used by each program must be included, if it is not known who the subcontractor will be, an estimated amount and whatever budget detail is anticipated should be provided. (Submit the actual detail when it is available). A separate subcontractor schedule must be completed for each program included in the contract. For example: The contract is providing both a Needle Exchange program and an AIDS Prevention Education Program and Subcontractor "A" is providing services to both program there must be a separate budget for Subcontractor "A" for each.

2. Detail of Each Subcontractor:

Choose a category below for each subcontract using the basis by which it is paid:

☐ A. Budget Basis ☐ B. Fee for Service ☐ C. Hourly Rate.

Provide the detail for each subcontract referencing the corresponding program of the contract. Detail must be provided for each subcontractor listed in the Summary.

Example A. Budget Basis

Outreach Educator \$20/hr x 20hrs/wk x 50wks	\$20,000
Travel 1000 miles @ .26 cents/mile	260
Supplies	500
Total	\$20,760

Example B. Fee for Service:

Develop and Produce	
500 Videos @ \$10 each	\$5,000
Total	

Example C. Hourly Rate:

Quality Assurance Review of 200 Patient Charts	
by Nurse Clinician 200 hours @ \$25/hour	\$5,000
Total	\$5,000

*****Please note: If Laboratory Services is included in a subcontract, please supply a justification as to why a private laboratory is being used as opposed to the Connecticut State Laboratory.**

Project staffing

Page 5 of 16

Applicant Name: _____

FUNDING PERIOD: January 1, 2014 to July 31, 2014

Position Description and Staff Person Assigned	Site/ Location	Hours wk/ wks per Year	Hourly Rate	Total Salary Charged	Fringe Benefit Rate %	Total Fringe Benefits
1.Position: Name:		/			%	
2.Position: Name:		/			%	
3.Position: Name:		/			%	
4.Position: Name:		/			%	
5.Position: Name:		/			%	
6.Position: Name:		/			%	
7.Position: Name:		/			%	
8.Position: Name:		/			%	
9.Position: Name:		/			%	
10.Position: Name:		/			%	
Totals						

APPLICANT NAME**FUNDING PERIOD: 01/01/2014 to 07/31/2014****Budget Summary Schedule A**

Program:	Name	Name	Total
1. Salaries & Wages			
2. Fringe Benefits			
3. Travel			
4. Training			
5. Educational Materials			
6. Office Supplies			
7. Medical Materials			
8. Contractual (Sub-Contracts)**			
9. Telephone			
10. Advertising			
11. Other Expenses (list)			
a.			
b.			
c.			
d.			
e.			
f.			
g.			
h.			
i.			
12. Administrative and General Costs			
Total DPH Grant			
Other Program Income			

**Complete Subcontractor Schedule C

Page 7 of 16

FUNDING PERIOD: 01/01/2014 to 07/31/2014

Budget Justification Schedule B

Line Item (Description)	Amount	Justification including Breakdown of Costs
Total Program Cost:		

Organizational Profile (make as many blank pages as needed)**Page 9 of 16**

Services provided
Geographic service areas
Physical facilities
Number and type of staff (in particular providers with prescribing authority)
Administrative services
Governance structure
Past history of contracts with the Department
Length of time in operation
How an antimicrobial stewardship program will fit into the mission of the organization, and any synergy it may have with current activities
Experience of the organization and key staff in assessing the quality of ambulatory care
Capacity of the organization to provide assessment, evaluation, training, and data collection and management services
Experience with the medical community outside the organization on other collaborative projects
Plans to collaborate with other agencies or subcontractors on this project (letters of support)

Staffing (make as many blank pages as needed)**Page 10 of 16**

Name of staff person paid for work on this project	Job Description - describe the specific duties for this project	Qualifications and training of the staff person for this project (before and during the project period)	Supervision (who will supervise the staff person and their role on the project and in the organization)

1. Attach resumes for all staff paid for work on this project.
2. Attach resumes for all direct supervisor staff work on this project.

Work Plan**Page 11 of 16**

Services to be Provided	Activities	Staff Position(s) Responsible	Timeframe for Completion
Project steering group	Membership, role, etc.		Meeting/consultation schedule
Get Smart review	Website assessment		
Initial assessment of provider and patient knowledge, attitudes, and behaviors			
Provider education	Materials distribution, "circuit riding/detailing" etc.		
Patient education			
Partnership with other medical organizations or facilities (if planned)			
Prescribing data collection, analysis			
Follow-up assessment of provider and patient knowledge, attitudes, and behaviors			
Participant satisfaction assessment			

OPM ETHICS FORM 5
**STATE OF CONNECTICUT
CONSULTING AGREEMENT AFFIDAVIT**

Affidavit to accompany a State contract for the purchase of goods and services with a value of \$50,000 or more in a calendar or fiscal year, pursuant to Connecticut General Statutes §§ 4a-81(a) and 4a-81(b)

INSTRUCTIONS:

If the bidder or vendor has entered into a consulting agreement, as defined by Connecticut General Statutes § 4a-81(b)(1): Complete all sections of the form. If the bidder or vendor has entered into more than one such consulting agreement, use a separate form for each agreement. Sign and date the form in the presence of a Commissioner of the Superior Court or Notary Public. **If the bidder or vendor has not entered into a consulting agreement, as defined by Connecticut General Statutes § 4a-81(b)(1):** Complete only the shaded section of the form. Sign and date the form in the presence of a Commissioner of the Superior Court or Notary Public.

Submit completed form to the awarding State agency with bid or proposal. For a sole source award, submit completed form to the awarding State agency at the time of contract execution.

This affidavit must be amended if the contractor enters into any new consulting agreement(s) during the term of the State contract.

AFFIDAVIT: [Number of Affidavits Sworn and Subscribed On This Day: _____]

I, the undersigned, hereby swear that I am the chief official of the bidder or vendor awarded a contract, as described in Connecticut General Statutes § 4a-81(a), or that I am the individual awarded such a contract who is authorized to execute such contract. I further swear that I have not entered into any consulting agreement in connection with such contract, **except for the agreement listed below:**

Consultant's Name and Title	Name of Firm (if applicable)
-----------------------------	------------------------------

Start Date	End Date	Cost
------------	----------	------

Description of Services Provided:

Is the consultant a former State employee or former public official? ☐ YES ☐ NO

If YES:

Name of Former State Agency

Termination Date of Employment

Sworn as true to the best of my knowledge and belief, subject to the penalties of false statement.

Printed Name of Bidder or Vendor	Signature of Chief Official or Individual	Date
----------------------------------	---	------

Printed Name (of above)

Awarding State Agency

Sworn and subscribed before me on this _____ day of _____, 20____.

**Commissioner of the Superior Court
or Notary Public**



STATE OF CONNECTICUT CONSULTING AGREEMENT AFFIDAVIT

Affidavit to accompany a State contract for the purchase of goods and services with a value of \$50,000 or more in a calendar or fiscal year, pursuant to Connecticut General Statutes §§ 4a-81(a) and 4a-81(b)

INSTRUCTIONS:

If the bidder or vendor has entered into a consulting agreement, as defined by Connecticut General Statutes § 4a-81(b)(1): Complete all sections of the form. If the bidder or contractor has entered into more than one such consulting agreement, use a separate form for each agreement. Sign and date the form in the presence of a Commissioner of the Superior Court or Notary Public. **If the bidder or contractor has not entered into a consulting agreement, as defined by Connecticut General Statutes § 4a-81(b)(1):** Complete only the shaded section of the form. Sign and date the form in the presence of a Commissioner of the Superior Court or Notary Public.

Submit completed form to the awarding State agency with bid or proposal. For a sole source award, submit completed form to the awarding State agency at the time of contract execution.

This affidavit must be amended if there is any change in the information contained in the most recently filed affidavit not later than (i) thirty days after the effective date of any such change or (ii) upon the submittal of any new bid or proposal, whichever is earlier.

AFFIDAVIT: [Number of Affidavits Sworn and Subscribed On This Day: ____]

I, the undersigned, hereby swear that I am a principal or key personnel of the bidder or contractor awarded a contract, as described in Connecticut General Statutes § 4a-81(b), or that I am the individual awarded such a contract who is authorized to execute such contract. I further swear that I have not entered into any consulting agreement in connection with such contract, **except for the agreement listed below:**

_____ Consultant's Name and Title		_____ Name of Firm (if applicable)
_____ Start Date	_____ End Date	_____ Cost
Description of Services Provided: _____		

Is the consultant a former State employee or former public official? ☐ YES ☐ NO

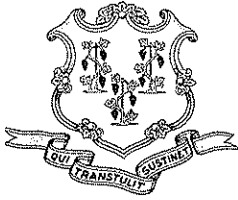
If YES: _____
Name of Former State Agency Termination Date of Employment

Sworn as true to the best of my knowledge and belief, subject to the penalties of false statement.

_____ Printed Name of Bidder or Vendor	_____ Signature of Chief Official or Individual	_____ Date
	_____ Printed Name (of above)	_____ Dept. of Public Health Awarding State Agency

Sworn and subscribed before me on this _____ day of _____, _____.

**Commissioner of the Superior Court
or Notary Public**



STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH

OFFICE OF COMMISSIONER

AFFIRMATIVE ACTION CONTRACT COMPLIANCE POLICY STATEMENT


The Department of Public Health (DPH) is an Affirmative Action/Equal Employment Opportunity employer, in compliance with all state and federal laws and shall comply with the Contract Compliance Regulations and CGS 4a-60 Nondiscrimination and affirmative action provisions in contracts of the state and political subdivisions other than municipalities. Consistent with the Contract Compliance Regulations of Connecticut State Agencies, Sections 46a-68j-21 through 46a-68j-43, DPH encourages bidders, contractors, subcontractors, and suppliers to:

- Develop and follow a plan of affirmative action to achieve or exceed parity of employment with the applicable labor market
- Develop and follow an apprenticeship program complying with Sections 46a-68-1 to 46a-68-17 of the Administrative Regulations of Connecticut State Agencies, inclusive
- Submit employment statistics contained in the "Employment Information Form", indicating that the composition of its workforce is at or near parity when compared to the race/sex composition of the workforce in the relevant labor market area
- Develop and follow a plan to set aside a portion of the contract for legitimate minority business enterprises per Section 46a-68j-30(10)(E) of the Contract Compliance Regulations

DPH considers bidders success in these factors in reviewing the bidder's qualifications under the Contract Compliance requirements. Accordingly, any individual or organization that desires to do business with DPH shall:

- Not discriminate or permit discrimination against any protected class person or protected group in the performance of contracts
- Not engage in discriminatory practices or permit discriminatory practices in their workplace
- Cooperate with the Connecticut Commission on Human Rights and Opportunities in all activities
- In all contract solicitations or advertisements, state that they are an "affirmative action-equal opportunity employer"
- Sign a Notification to Bidders Form, and complete a workforce analysis questionnaire necessary for the contract award process

DPH notifies bidders, contractors, subcontractors, and suppliers of this policy and will not knowingly do business with any contractor, subcontractor or supplier of materials who unlawfully discriminates against members of any class protected under state or federal law. Contractors whose overall employment statistics are not reflective of the general employment area may be required to show good faith efforts to ensure that their personnel policies and practices do not have a discriminatory impact.


Jewel Mullen, MD, MPH, MPA
Commissioner, DPH


Date

NOTIFICATION TO BIDDERS

The contract to be awarded is subject to contract compliance requirements mandated by Sections 4a-60 and 4a-60a of the Connecticut General Statutes; and, when the awarding agency is the State, Sections 46a-71 (d) and 46a-81i (d) of the Connecticut General Statutes. There are Contract Compliance Regulations codified at Section 46a-68j-21 through 46a-68j-43 of the Regulations of Connecticut State agencies, which establish a procedure for the awarding of all contracts covered by Sections 4a-60 and 46a-71 (d) of the Connecticut General Statutes.

According to Section 46a-68j-30 (9) of the Contract Compliance Regulations, every agency awarding a contract subject to the contract compliance requirements has an obligation to "aggressively solicit the participation of legitimate minority business enterprises as bidders, contractors, subcontractors and suppliers of materials." "Minority Business Enterprise" is defined in Section 4a-60 of the Connecticut General Statutes as a business wherein fifty-one percent or more of the capital stock, or assets belong to a person or persons: "(1) Who are active in the daily affairs of the enterprise; (2) Who have the power to direct the management and policies of the enterprise; and, (3) Who are members of a minority, as such term is defined in subsection (a) of Section 32-9n." "Minority" groups are defined in Section 32-9n of the Connecticut General Statutes as "(1) Black Americans ... (2) Hispanic Americans ... (3) Women ... (4) Asian Pacific Americans and Pacific Islanders; or (5) American Indians." The above definitions apply to the contract compliance requirements by virtue of Section 46a-68j-21 (11) of the Contract Compliance Regulations.

The awarding agency will consider the following factors when reviewing the bidder's qualifications under the contract compliance requirements.

- a) the bidder's success in implementing an affirmative action plan;
- b) the bidder's success in developing an apprenticeship program complying with Sections 46a-68-1 to 46a-68-18 of the Connecticut General Statutes, inclusive;
- c) the bidder's promise to develop and implement a successful affirmative action plan;
- d) the bidder's submission of EEO-1 data indicating the composition of its workforce is at or near parity when compared to the racial and sexual composition of the workforce in the relevant labor market area; and,
- e) the bidder's promise to set aside a portion of the contract for legitimate minority business enterprises. See Section 46a-68j-30 (10) (E) of the Contract Compliance Regulations.

INSTRUCTION: Bidder must sign acknowledgment below line and return acknowledgment to Awarding Agency along with the bid proposal.

The undersigned acknowledges receiving and reading a copy of the "Notification to Bidders" form.

Signature

Date

On behalf of:

WORKFORCE ANALYSIS

Contractor Name:
Address:

Total Number of CT employees:
Full Time: Part Time:

Complete the following Workforce Analysis for employees on Connecticut worksites who are:

Job Categories	Overall Totals (sum of all cols. male & female)	White (not of Hispanic Origin)		Black (not of Hispanic Origin)		Hispanic		Asian or Pacific Islander		American Indian or Alaskan Native		People with Disabilities	
		Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female
Officials & Managers													
Professionals													
Technicians													
Office & Clerical													
Craft Workers (skilled)													
Operatives (semi-skilled)													
Laborers (unskilled)													
Service Workers													
Totals Above													
Totals 1 year Ago													
FORMAL ON-THE-JOB TRAINEES (Enter figures for the same categories as are shown above)													
Apprentices													
Trainees													
EMPLOYMENT FIGURES WERE OBTAINED FROM:						Visual Check:		Employment Records		Other:			

1. Have you successfully implemented an Affirmative Action Plan? ☐ YES ☐ NO
Date of implementation: _____ If the answer is "No", explain.

1. a) Do you promise to develop and implement a successful Affirmative Action?
☐ YES ☐ NO ☐ Not Applicable Explanation:

2. Have you successfully developed an apprenticeship program complying with Sec. 46a-68-1 to 46a-68-18 of the Connecticut Department of Labor Regulations, inclusive: ☐ YES ☐ NO ☐ Not Applicable Explanation:

3. According to EEO-1 data, is the composition of your work force at or near parity when compared with the racial and sexual composition of the work force in the relevant labor market area? ☐ YES ☐ NO Explanation:

4. If you plan to subcontract, will you set aside a portion of the contract for legitimate minority business enterprises?
☐ YES ☐ NO Explanation:

Contractor's Authorized Signature

Date